2013 Inaugural Vending License Application

LANGUAGE PREFERRED
BUSINESS TYPE (Optional) ☐ Sole Proprietor ☐ Partnership ☐ Limited Liability Co. ☐ Corporation (For Profit) ☐ Corporation (Non- Profit)
CURRENT VENDOR STATUS ☐ DC Licensed Vendor ☐ Unlicensed DC Resident ☐ Unlicensed Out-of-State Resident
If current DC Licensed Vendor, please provide DC Basic Business License Number:
Section A APPLICANT/BUSINESS INFORMATION
NAME OF APPLICANT/BUSINESS OWNER
The Applicant/Business Owner must be on site during the event. Unlicensed vendors must provide two passport sized photos and a criminal history report with application.
FEDERAL ID Federal Employee Identification Numberor Social Security Number
DATE OF BIRTH
STREET ADDRESS SUITE or APARTMENT NUMBER
CITY STATE ZIP CODE
PHONE NUMBER () EMAIL (REQUIRED)
Section B VENDING AND VEHICLE/EQUIPMENT INFORMATION
ITEMS TO BE SOLD
Food Merchandise Other, please indicate: If selling food items, you must have a current certified food manager certificate from the jurisdiction in which you reside posted at your vending site at all times.
VENDING EQUIPMENT INFORMATION
□ Roadway Trailer □ Sidewalk Vending Cart □ Vending Stand □ Mobile Food Truck
Please indicate dimensions of Roadway Trailer, Sidewalk Vending Cart, or Mobile Food Cart (example: 4 feet by 8 feet)
LOAD-IN/LOAD-OUT VEHICLE INFORMATION
TAG NUMBER STATE ISSUED MAKE MODEL
No motorized vehicles will be allowed inside the Inaugural Vending Zone during the event.
Section C ADDITIONAL ON-SITE EMPLOYEES (HELPERS)
You may elect to have up to two additional employees (helpers) working on site during the event. Please provide their personal information including email addresses which are mandatory.
Check if you included criminal history checks and two passport-size photos for each employee. These are required.
NAME OF EMPLOYEE ONE
SOCIAL SECURITY NUMBER DATE OF BIRTH
STREET ADDRESS SUITE/APARTMENT NUMBER
CITY STATE ZIP CODE
PHONE NUMBER () EMAIL
NAME OF EMPLOYEE TWO
SOCIAL SECURITY NUMBER DATE OF BIRTH
STREET ADDRESS SUITE/APARTMENT NUMBER
CITY STATE ZIP CODE
PHONE NUMBER () EMAIL

DCRA VENDING HELP LINE 202-442-4310

Section D FEES - Your total amount of fees due is based on number of vending days as well as number of helpers. **NOTE - ALL FEES ARE NON-REFUNDABLE. Fee Schedule** DCRA Application Fee \$50.00 DCRA Endorsement Fee \$25.00 DCRA License Fee \$150.00 Additional Vending Day Fee (RFK only) \$100.00 (per day) DCRA per Additional Helper \$50.00 (Maximum two) OTR Inauguration Special Event Bond * \$500.00 (one time charge) Below is the total amount of fees broken down in the order in which you would pay: Submitted along with your completed applications no later than COB 10/26/12, all vendors should remit: \$50.00 Application Fee Endorsement Fee \$25.00 \$75.00 **Total:** Upon review of your completed application, DCRA will notify you via **email** that your application will be submitted into 2013 Inaugural Vending Site Lottery. The lottery will be held in the month of **December**. Once you have been designated a site through the lottery, you will then be required to submit: OTR Inauguration Special Event Bond * \$500.00 (one time charge) **Total:** \$500.00 (Doesn't apply to currently licensed District vendors) AND Temporary License Fee \$150.00 Additional Employee/Helper Fee \$ 50.00 (maximum two people) Additional Vending Days \$100.00 (per day, maximum three (3) additional days) between \$150.00 and \$650.00 *CURRENTLY LICENSED DC VENDORS DO NOT NEED TO PAY ONE-TIME BOND. **Section E APPLICANT'S SIGNATURE & PAYMENT INFORMATION** Mail your application to or submit your signed application including all required documents and fees, by the deadline, via certified funds only (cashier's check, money order) making all payable to "DC Treasurer" to: **Department of Consumer and Regulatory Affairs Attention: Office of Special Events/Vending** 1100 4th Street SW, 4th Floor Washington, DC, 20024 I hereby submit this application, required forms and payment in the amount of \$_____ for a 2013 Inauguration Special Events **License** based on the information in this application. Applicant Signature _____ Vendor Helper Signature _____ Date _____ Vendor Helper Signature _____ Date I/We understand that, anyone who makes a false statement on this form can be criminally prosecuted; and, if convicted, fined up to \$1000, imprisoned up to 180 days, or both, under D.C. Official Code § 22-2405.

DC INSPECTOR GENERAL HOTLINE: If you are aware of corruption, fraud, waste, abuse or mismanagement involving any DC government agency, official or program, Contact the Office of the Inspector General (OIG) at (202) 727-0267 or (800) 521-1639 (toll free). All reports are confidential and you may remain anonymous by law. Government employees are protected from reprisals or retaliation by their employers for reporting to the OIG. The information you provide may result in an investigation leading to administrative action, civil penalties or criminal prosecution in appropriate cases.

NOTICE OF NON-DISCRIMINATION: In accordance with DC Human Rights Act of 1977, as amended, DC Code Section 2.1401.01 et seq., ("the Act") the District of Columbia does not discriminate on the basis of race, color, national origin, sex, age, marital status, sexual orientation, family responsibilities, matriculation, political affiliation, disabilities, source of income, or place of residence or business. Discrimination in violation of this act will not be tolerated. Violators will be subject to disciplinary action.

For a full listing of all restrictions, please refer to our 2013 Special Event Vending License Details located at http://dcra.dc.gov